PTC/S8/06 (08-03)
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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875						Application or Docket Number		
CLAIMS AS FILED - PART I					ENTITY	OR	OTHER THAN R SMALL ENTITY	
FOR	FOR NUMBER FILED		NUMBER EXTRA		FEE		RATE	FEE
BASIC FEE (37 CFR 1.16(a))	SIC FEE		RATE	1,	1	MIE	2400	
TOTAL CLAMS (37 CFR 1.16(e)) minus 20 "				<del>                                     </del>	OR		1.7500	
INDEPENDENT CLAIMS	<del></del>			<u>  ~ • • • • • • • • • • • • • • • • • • </u>	<del>                                     </del>	OR	X &°	<del>                                     </del>
(37 CFR 1.16(b)) minus 3 = '			<u> </u>	<del>                                     </del>	OR	× 8	<del>      -   -   -   -   -   -   -   -   -</del>	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(6))				+3	<del>  /</del>	OR	+5	1
• If the difference in octume 1 is less than zero, enter "O" in column 2.				TOTAL		OR	TOTAL	260.00
CLAIMS AS AMENDED - PART II								
	olumn 1)	(Column 2)	(Column 3)	SMALL	ENTITY	OR		ENTITY
<b>≪</b>   RE	CLAIMS :MAINING AFTER ENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE	/	RATE	ADDI- TIONAL
Total	2 Minus	30	• /	X S =	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	20	v	HEE/
Total AM  Total 07 CPR List(c) 1  (a) CPR List(c) 1  (a) CPR List(c) 1  (a) CPR List(c) 1  (a) CPR List(c) 1  (b) CPR List(c) 1  (c) CPR List(c) 1  (d) CPR List(c) 1  (e) CPR List(c) 1	Minus	2	1.	× 8	/	OR	× s•	<del></del>
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					<del>  /  </del>	OR	X \$	
				TOTAL	<del>  / -  </del>	OR	†\$ =	-/
09 15 04 (Column 1) (Column 2) (Column 3)				ADD'L FEE	لــــــا	QR	ADD'L FEE	<b>-</b> /
	AIMS	(Column 2)	(Column 3)					_/
EN ME	MAINING UFTER ENDMENT	NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Car Call 1'10(ch)	3 Minus	20	·Or	x se		OR	X \$=	
Z tridependent process supply	Minus	-3	6	x s•		OR	xs •	
FIRST PRESENTATION OF MILETPLE DEPENDENT CLAIM (37 CFR 1.18(d))				+: -		OR	+:	
				TOTAL ADDL FEE		OR	YOTAL ADDL FEE	4
(Col			•	7001.12				
U GREN	LAIMS LAINING FTER	(Column 2) HIGHEST NUMBER PREVIOUSLY	(Column 3) PRESENT EXTRA	RATE	ADDI- TIONAL	]	POSTE	ADDI-
Z Total AME	NDMENT Minus	PAID FOR			FEE	$\overline{}$		TIONAL FEE
O COT CFR 1.18(c)	3 Miraus	an	-	<u> </u>		OR	x s	
Dron Liapi)				× 1		OR	X	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+1/-		OR	+ 5	
				ADD1 FEE		OR -	TOTAL ADDL FEE	
If the entry in column 1 is less than the entry in column 2, write "O" in column 3.     If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".     If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20".     The "Highest Number Previously Paid For" (Total or Independent) is the jumplest number found in the appropriate boy in column 1.								

Ins "Highest number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be earl to the Chief Information Officer, U.S. Patent and Tredemerk Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Cemmissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.